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Application Number	10/076,276
Filing Date	02/15/2002
First Named Inventor	Heise, Thomas H.
Art Unit	2642
Examiner Name	Ageppa, Hector
Attorney Docket	HESS-10721

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **23123**☒ Please change the correspondence address for the above-identified application to:☒ The address associated with  
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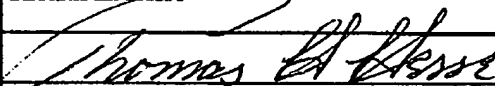
I am the:

☒ Applicant/Inventor☐Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

**Thomas H. Heise**

Signature



Date

**May 2 2005**

Telephone

**480-345-9120**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of **1** forms are submitted.

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